

FORM
5A

Rev
06/12

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:
400446173

Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 19035
2. Name of Operator: OVERLAND RESOURCES LLC
3. Address: 5600 S QUEBEC ST #110-A
City: GREENWOOD State: CO Zip: 80111
4. Contact Name: Greg Pandolfo
Phone: (303) 800-6175
Fax: (720) 204-4078
Email: greg@overlandresourcesllc.com

5. API Number 05-001-09744-00
6. County: ADAMS
7. Well Name: Handke
Well Number: 3
8. Location: QtrQtr: SESE Section: 10 Township: 3S Range: 64W Meridian: 6
9. Field Name: SONAR Field Code: 77635

Completed Interval

FORMATION: D SAND Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 01/22/2013 End Date: 01/25/2013 Date of First Production this formation: 04/02/2013
Perforations Top: 7942 Bottom: 7950 No. Holes: 28 Hole size: 042/100

Provide a brief summary of the formation treatment: Open Hole:

26036 gal of WATER FRAC G 30# - SBM (15347).
19832 gal of WATER FRAC G 30# - SBM (15347) carrying 323.76 100*lb of SAND - STANDARD - 20/40, 100 LB, SK (100003628).
The average BH treating rate was 20.0 bpm and average WH pressure was 2567 psi.
The total liquid load to recover is 45868 gal.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 1130 Max pressure during treatment (psi): 4131
Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): 0.50
Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.84
Total acid used in treatment (bbl): 23 Number of staged intervals: 10
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 0
Fresh water used in treatment (bbl): 1092 Disposition method for flowback: _____
Total proppant used (lbs): 32376 Rule 805 green completion techniques were utilized:
Reason why green completion not utilized: PRESSURE

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 02/15/2013 Hours: 24 Bbl oil: 2 Mcf Gas: 40 Bbl H2O: 7
Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: 23529
Test Method: Plunger Casing PSI: 240 Tubing PSI: 190 Choke Size: _____
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1514 API Gravity Oil: 50
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7930 Tbg setting date: 01/25/2013 Packer Depth: 7771

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

Comment: _____

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Greg Pandolfo
Title: Manager Date: _____ Email: greg@overlandresourcesllc.com

Attachment Check List

Att Doc Num	Name
400518133	CEMENT JOB SUMMARY
400518138	NET PRESSURE CHART
400520421	OTHER

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)